

# SECTION 5 - SYSTEM MANAGER'S INTEGRATED BILLING MENU

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## Section 5 - System Manager's Integrated Billing Menu

## **Option Overview**

**SELECT DEFAULT DEVICE FOR FORMS** - Used to select the default devices on which UB-82, UB-92, and HCFA-1500 forms will print.

**FORMS OUTPUT UTILITY** - This option displays a list of local forms defined for your site and the associated actions allow you to add local forms and data elements and to override specific fields on a local form associated with the national one. It also allows you to define a local SCREEN 9 for bill data entry.

## **CHARGE MASTER IRM MENU**

**LOAD HOST FILE INTO CHARGE MASTER** - This option allows new rates and charges to be added to the Charge Master form host files. This is only available for specific rates and charges.

**RATE SCHEDULE** - This option allows the enter/edit of the Rate Schedule Adjustment field (#363.10). This field causes all charges for a particular schedule to be adjusted by a site defined amount.

**DISPLAY INTEGRATED BILLING STATUS** - Allows you to view data from the IB SITE PARAMETER file and pertinent information about the status of the IB background filer.

**ENTER/EDIT IB SITE PARAMETERS** - Allows you to enter or edit the INTEGRATED BILLING SITE PARAMETER file.

**INQUIRE AN IB ACTION** - Provides a display of a captioned inquiry for a specified IB action.

**PATIENT IB ACTION INQUIRY** - Provides a brief display of IB actions for a selected patient and date range.

## **PURGE MENU**

**PURGE UPDATE FILE** - Used to delete all CPT entries in the temporary file, UPDATE BILLABLE AMBULATORY SURGICAL CODE (#350.41) that have been successfully transferred to the permanent file, BILLABLE AMBULATORY SURGICAL CODE (#350.4).

**ARCHIVE BILLING DATA** - Used to archive data contained in search templates.

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**ARCHIVE/PURGE LOG INQUIRY** - Used to provide a full inquiry of any entry in the IB ARCHIVE/PURGE LOG file (#350.6).

**DELETE ENTRY FROM SEARCH TEMPLATE** - Used to remove entries that you do not wish to purge from the search template.

**FIND BILLING DATA TO ARCHIVE** - Used to identify records that meet the criteria to be archived and purged from the INTEGRATED BILLING ACTION file (#350), the CATEGORY C BILLING CLOCK file (#351), and the BILL/CLAIMS file (#399).

**LIST ARCHIVE/PURGE LOG ENTRIES** - Used to list all log entries in the IB ARCHIVE/PURGE LOG file (#350.6).

**LIST SEARCH TEMPLATE ENTRIES** - Used to list all entries in a search template that are scheduled to be archived and subsequently purged.

**PURGE BILLING DATA** - Used to purge data from the INTEGRATED BILLING ACTION file (#350) (pharmacy copayment transactions only), the CATEGORY C BILLING CLOCK file (#351), and/or the BILL/CLAIMS file (#399).

**REPOST IB ACTION TO FILER** - Allows Integrated Billing action entries that did not successfully pass to Accounts Receivable to be reposted to the IB filer.

**START THE CHAMPUS RX BILLING ENGINE** - This option is used by IRM personnel to queue the background filer to run.

**START THE INTEGRATED BILLING BACKGROUND FILER** - Used to force a filer to start running when a filer job has terminated unexpectedly.

**STOP THE CHAMPUS RX BILLING ENGINE** - This option may be used to gracefully shut down the billing engine if a planned system shutdown is scheduled to occur, or if the RNA system is scheduled to be shutdown.

**STOP THE INTEGRATED BILLING BACKGROUND FILER** - Used to shutdown the IB background filer.

**VERIFY RX CO-PAY LINKS** - Compares the softlink stored in Integrated Billing with the pointer in the PRESCRIPTION file pointing back to Integrated Billing, to provide a display/print-out of all integrated billing actions which do not verify for a selected range of reference numbers.

## **Purge Functionality**

The first option in the Purge Menu, Purge Update File, is used to delete all CPT entries from the temporary file, UPDATE BILLABLE AMBULATORY SURGICAL CODE (#350.41), after they have been transferred to the permanent file, BILLABLE AMBULATORY SURGICAL CODES (#350.4). This is usually done yearly, after a HCFA update of the CPT codes.

The remainder of the options in this menu are used to archive and purge billing data. The files which may be archived and subsequently purged are the INTEGRATED BILLING ACTION file (#350) (pharmacy copayment transactions only), the CATEGORY C BILLING CLOCK file (#351), and the BILL/CLAIMS file (#399).

Billing data from the current and one previous fiscal year, at a minimum, must be maintained on-line; however, you may choose to maintain data from additional fiscal years, if desired.

The following criteria must be met to purge billing data.

INTEGRATED BILLING ACTION file  
(pharmacy copayment actions)

The prescription which caused the action to be created must have been purged from the pharmacy database before the action may be archived. In addition, the bill must be closed in Accounts Receivable. The date the bill was closed is the date used to determine whether it will be included.

CATEGORY C  
BILLING CLOCK file

Only clocks with a status of CLOSED or CANCELLED and a clock end date prior to the selected time frame are included.

BILL/CLAIMS file

The bill must be closed in Accounts Receivable. The date the bill was closed is the date used to determine whether it will be included.

There are three steps involved in the archiving and purging of these files.

- A search is conducted to find all entries which may be archived through the Find Billing Data to Archive option. You choose which of the three files you wish to include in the search. The entries found are temporarily stored in a sort (search) template in the SORT TEMPLATE file (#.401). An entry is also made to the IB ARCHIVE/PURGE LOG file (#350.6). This log may be viewed through the Archive/Purge Log Inquiry and List Archive/Purge Log Entries options.

The List Search Template Entries option allows you to view the contents of a search template. You may delete entries from the search template using the Delete Entry from Search Template option.

- The entries are archived using the Archive Billing Data option. It is highly recommended that you archive the entries to paper (print to a non-slave printer) as there is currently no functionality to retrieve or restore data that has been archived.
- The data is purged from the database using the Purge Billing Data option. The search template containing the purged entries is also deleted. An electronic signature code and the XUMGR security key are required to archive and purge data.

## Select Default Device for Forms



Two new fields:

PRINT FORM NAME - used by the Forms Output Utility. If this name is not entered, the UB-92 and HCFA-1500 forms will not use the Forms Output Utility to print bills.

LOCAL SCREEN 9 - used by the Enter/Edit Billing Information option as the name of the special form to display a local screen.

### Introduction

This option is used to select the default devices on which third party claim forms will print. The devices entered through this option will appear as the default devices when using options which generate these forms. Separate devices may be entered for each type of form.

You will be prompted for the form type. To avoid making duplicate entries of the same form type, it is suggested you type <??> at this prompt to first view the selections.

You will then be prompted for a default printer (in Billing) and a follow-up printer (in Accounts Receivable). You **must** enter an Accounts Receivable default device for follow-ups for every form except the UB-82.

In order to utilize the Print Authorized Bills option on the Third Party Billing Menu, you must set up billing default printers for each form type through this option. Any form type not set up with a billing default printer will not print when utilizing the Print Authorized Bills option.

The billing default printer must be added for the BILL ADDENDUM form type in order for the addendums to automatically print for every HCFA-1500 bill with prescription refills or prosthetic items.

## Section 5 - System Manager's Integrated Billing Menu

### Select Default Device for Forms

#### Example

Select BILL FORM TYPE NAME: <??>  
ANSWER WITH BILL FORM TYPE NUMBER, OR NAME  
CHOOSE FROM:

- |   |               |
|---|---------------|
| 1 | UB-82         |
| 2 | HCFA-1500     |
| 3 | UB-92         |
| 4 | BILL ADDENDUM |

Select BILL FORM TYPE NAME: **1** UB-92  
NAME: UB-92// **<RET>**  
DEFAULT PRINTER (BILLING): **B50**  
FOLLOW-UP PRINTER (A/R): **<RET>**  
PRINT FORM NAME: **UB-92**  
LOCAL SCREEN 9:

Select BILL FORM TYPE NAME: **2** HCFA-1500  
NAME: HCFA-1500// **<RET>**  
DEFAULT PRINTER (BILLING): **A200**  
FOLLOW-UP PRINTER (A/R): **750C**  
PRINT FORM NAME: **HCFA-1500**  
LOCAL SCREEN 9:

Select BILL FORM TYPE NAME: **3** UB-92  
NAME: UB-92// **<RET>**  
DEFAULT PRINTER (BILLING): **A100**  
FOLLOW-UP PRINTER (A/R): **700D**  
PRINT FORM NAME: **UB-92**  
LOCAL SCREEN 9:

Select BILL FORM TYPE NAME: **4** BILL ADDENDUM  
NAME: UB-92// **<RET>**  
DEFAULT PRINTER (BILLING): **A200**  
FOLLOW-UP PRINTER (A/R): **750C**  
PRINT FORM NAME: **BILL ADDENDUM**  
LOCAL SCREEN 9:



## Display Integrated Billing Status

**INTRODUCTION** The Display Integrated Billing Status option allows you to view data from the IB SITE PARAMETER file and pertinent information about the status of the IB background filer. For further explanation of the IB site parameters, please refer to the Enter/Edit IB Site Parameters option documentation.

One or more of the following messages may appear.

"The Integrated Billing filer has more than 10 transactions in the queue."

"The Integrated Billing filer is not running and has transactions to file."

"The Integrated Billing filer is late. It hasn't run since {date/time}."

If the second message appears, use the Start the Integrated Billing Background Filer option to start the filer. If the first or third message appear, recheck the status in a few minutes. If the message(s) persists or the "Number of Transactions in Queue" increases, use the Start the Integrated Billing Background Filer option to start the filer.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Display Integrated Billing Status

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses appear in boldface type.

Select System Manager's Integrated Billing Menu Option: **DIS**play Integrated Billing Status

#### Integrated Billing Status

```
=====
IB Facility Name ..... ALBANY
IB Facility Number ..... 500
```

```
File in Background ..... YES
Filer UCI,VOL .....
Filer Hang Time ..... 2 Seconds
Background Error Mail Group ..... IB ERROR
```

Filer does not Appear to be Running!

```
Filer currently queued to run ..... NO
Number Transactions in Queue ..... 0
Filer Started on .....
Filer Stopped on ..... APR 8, 1991@18:31:24
Filer last processed transaction on ..... APR 8, 1991@18:14:49
```

```
Transactions filed since midnight ..... 0
```

Press RETURN to continue or '^' to exit:

## Enter/Edit IB Site Parameters

**INTRODUCTION**    The Enter/Edit IB Site Parameters option allows you to enter or edit the INTEGRATED BILLING SITE PARAMETER file.

The following is a list of the parameters which may be entered/edited through this option. It should be noted that modification of these parameters may affect the performance of the Integrated Billing background filer.

**FACILITY NAME** - The name of your facility from your INSTITUTION file (there must be a station number associated with this entry). This value will be used by IFCAP in determining the bill number.

**FILE IN BACKGROUND** - If set to YES, the background filer will run as a background job. If set to NO or left blank, filing will occur as applications pass data to Integrated Billing.

**FILER UCI,VOL** - The UCI and volume set where you want the IBE filer to run. It is recommended that the filer run on the volume set that contains either the IB globals or the PRC globals. VAX sites should leave this field blank.

**FILER HANG TIME** - The number of seconds that the filer will remain idle after finishing all transactions and before checking for more transactions to file. The filer will shut itself down after 200 hangs with no activity detected. If this field is left blank, the default value is two.

**COPAY BACKGROUND ERROR GROUP** - This is the mail group you wish to receive mail messages from the IBE filer when an unsuccessful attempt to file is detected. "IB ERROR" will be entered during installation and will appear as a default the first time this option is used; however, it may be edited to any mail group you choose.

**COPAY EXEMPTION MAIL GROUP** - This is the mail group you wish to receive the copay exemption messages. The mail group specified as the CopayBackground Error Group will be entered during installation and will appear as the default the first time this option is used. It may be edited to any mail group you choose.

## Enter/Edit IB Site Parameters

### INTRODUCTION cont.

**USE ALERTS** - If your facility has Version 7 or higher of Kernel installed, you may choose whether or not to use alerts or bulletins for internal messages in Integrated Billing. The same mail group (Copoly Background Error Group) will receive both alerts and bulletins. This functionality is only available for the Medication Copayment Exemption software; however, if this is a desirable feature it may be expanded in the future. If this field is left unanswered, it defaults to NO and IB will use bulletins.

**CATEGORY C BILLING MAIL GROUP** - Members of this mail group will receive messages when Means Test/Category C billing processing errors have been encountered and when movements and Means Tests for Category C patients have been edited or deleted. "IB CAT C" will be entered during installation and will appear as a default the first time this option is used; however, it may be edited to any mail group you choose.

**PER DIEM START DATE** - The date that your facility informed Category C patients of the new per diem charges and began per diem billing. This field represents the earliest date for which the hospital (\$10.00) or nursing home (\$5.00) per diem charge may be billed to a Category C patient as mandated by Public Law 101-508 (implemented on November 5, 1990). Per diem billing will not occur if this field is left blank.

Due to the brevity of this option, no process chart is provided.

## Enter/Edit IB Site Parameters

### EXAMPLE

The following example shows what may appear on your screen while using this option. User responses are shown in boldface type.

```
FACILITY NAME: ALBANY
FILE IN BACKGROUND: YES
FILER UCI,VOL: <RET>
FILER HANG TIME: 2
COPAY BACKGROUND ERROR GROUP: IB ERROR// <RET>
COPAY EXEMPTION MAIL GROUP: IB ERROR// <RET>
USE ALERTS: YES// <RET>
CATEGORY C BILLING MAIL GROUP: IB CAT C// <RET>
PER DIEM START DATE: JAN 1, 1991
```

## Inquire an IB Action

**INTRODUCTION**    The Inquire an IB Action option provides a display of a captioned inquiry for a specified IB action. The purpose of this inquiry is to provide a quick reference of all the fields for all IB actions for a particular reference number.

Due to the brevity of this option, no process chart is provided.

## Inquire an IB Action

### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

Select INTEGRATED BILLING ACTION REFERENCE NUMBER: **5001**

REFERENCE NUMBER: 5001	PATIENT: DILLON,MICHAEL
ACTION TYPE: PSO NSC RX COPAY NEW	RESULTING FROM: 52:125
STATUS: BILLED	UNITS: 2
TOTAL CHARGE: 4	BRIEF DESCRIPTION: RX#125 120 -AMITRIPTYL
PARENT CHARGE: 5001	AR BILL NUMBER: 500 -M10003
AR TRANSACTION NUMBER: 5	INSTITUTION: ALBANY
USER ADDING ENTRY: SUMNER,ALAN	DATE ENTRY ADDED: MAR 15, 1991@15:14:16
USER LAST UPDATING: SUMNER,ALAN	DATE LAST UPDATED: MAR 15, 1991@15:14:20

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### Patient IB Action Inquiry

**INTRODUCTION**    The Patient IB Action Inquiry option provides a brief display of IB actions for a selected patient and date range. The purpose of this inquiry is to provide a quick reference of all the fields for all IB actions for a particular patient.

Due to the brevity of this option, no process chart is provided.



## Patient IB Action Inquiry

## EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

```

Select PATIENT NAME: COOPER,DAVE          01-01-40      097010140      SC VETERAN

Start with DATE: T-30  (MAR 11, 1991)
Go to DATE: T  (APR 10, 1991)

REFERENCE NUMBER: 500200          PATIENT: COOPER,DAVE
ACTION TYPE: PSO SC RX COPAY NEW RESULTING FROM: 52:349
STATUS: BILLED                   UNITS: 1
TOTAL CHARGE: 2                  BRIEF DESCRIPTION: RX#286 120 -CIMETIDINE
PARENT CHARGE: 500200            AR BILL NUMBER: 500 -M10027
AR TRANSACTION NUMBER: 160        INSTITUTION: ALBANY
USER ADDING ENTRY: JONES,ROBERT  DATE ENTRY ADDED: MAR 28, 1991@10:56:03
USER LAST UPDATING: JONES,ROBERT DATE LAST UPDATED: MAR 28, 1991@10:56:17

REFERENCE NUMBER: 500201          PATIENT: COOPER,DAVE
ACTION TYPE: PSO SC RX COPAY NEW RESULTING FROM: 52:350
STATUS: BILLED                   UNITS: 3
TOTAL CHARGE: 6                  BRIEF DESCRIPTION: RX#287 90 -ASPIRIN 32
PARENT CHARGE: 500201            AR BILL NUMBER: 500 -M10027
AR TRANSACTION NUMBER: 160        INSTITUTION: ALBANY
USER ADDING ENTRY: JONES,ROBERT  DATE ENTRY ADDED: MAR 28, 1991@10:56:05
USER LAST UPDATING: JONES,ROBERT DATE LAST UPDATED: MAR 28, 1991@10:56:17

REFERENCE NUMBER: 500202          PATIENT: COOPER,DAVE
ACTION TYPE: PSO SC RX COPAY NEW RESULTING FROM: 52:351
STATUS: CANCELLED                UNITS: 1
TOTAL CHARGE: 2                  BRIEF DESCRIPTION: RX#288 30 -CEPHRADINE
PARENT CHARGE: 500202            CANCELLATION REASON: ENTERED IN ERROR
AR BILL NUMBER: 500 -M10027       AR TRANSACTION NUMBER: 160
INSTITUTION: ALBANY              USER ADDING ENTRY: JONES,ROBERT
DATE ENTRY ADDED: MAR 28, 1991@10:56:06
USER LAST UPDATING: JONES,ROBERT DATE LAST UPDATED: APR  4, 1991@01:50:54

```

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu Purge Update File

**INTRODUCTION** The Purge Update File option is used to delete all CPT entries in the temporary file, UPDATE BILLABLE AMBULATORY SURGICAL CODE (#350.41) that have been successfully transferred to the permanent file, BILLABLE AMBULATORY SURGICAL CODE (#350.4). Upon completion, a total number of entries deleted is provided.

If the UPDATE BILLABLE AMBULATORY SURGICAL CODE file is not purged, the next time you transfer the file through the Run Amb. Surg. Update option, all of the entries that were previously transferred successfully will show as errors under "Codes already have entries for given effective date" and "Codes unable to transfer".

Only holders of the XUMGR security key may access this option.

Due to the brevity of this option, no process chart is provided.

Purge Menu  
Purge Update File

EXAMPLE

The following is an example of what might appear on your screen while using the Purge Update File option. User responses are shown in boldface type.

Delete Transferred Codes from the Temporary BASC File

This option will only delete BASC codes in the temporary file that have already been transferred to the permanent BASC file.

Do you want to delete transferred codes now? **Y** YES

Processing, this could take some time. Please wait...

Done. 1443 entries deleted from 350.41.

Purge Menu  
Archive Billing Data

**INTRODUCTION** This option is used to archive data contained in search templates. Search templates are created from the INTEGRATED BILLING ACTION file (#350) (pharmacy copayment transactions only), the CATEGORY C BILLING CLOCK file (#351), and/or the BILL/CLAIMS file (#399) using the Find Billing Data to Archive option. You may select which of the files you wish to archive.

It is recommended that you archive the entries to paper (print to a device) as there is currently no functionality to retrieve or restore archived data.

The XUMGR security key and an electronic signature code are required to complete the archive process. The archive process is automatically queued. All data elements in the file for each entry in the search template are archived.

You will be notified of the results via electronic mail. The ARCHIVE/PURGE LOG file (#350.6) is updated when the purge is completed. The log # provided in the mail message may be used for inquiries to this file.

Due to the brevity of this option, no process chart is provided.

## Purge Menu

### Archive Billing Data

#### EXAMPLE

The following example shows what might appear on your screen while using this option followed by a sample mail message. An example of the output generated by this option is provided on the following page. User responses are shown in boldface type. The symbol <signature> is used to indicate an electronic signature code being entered.

\*\*\* Archive Billing Data \*\*\*

This option is used to archive data from the following files:

```
#350  INTEGRATED BILLING ACTION
#351  CATEGORY C BILLING CLOCK
#399  BILL/CLAIMS
```

The archiving process will be queued.

-----  
You must find INTEGRATED BILLING ACTION entries before you can archive.  
-----

Do you wish to archive CATEGORY C BILLING CLOCK file entries? **Y** YES  
-----

Do you wish to archive BILL/CLAIMS file entries? **Y** YES  
Archive entries to what device: **A137** LASER

ENTER ELECTRONIC SIGNATURE: <signature>  
Your Electronic Signature Code has been verified.

Is it okay to queue this archive? **Y** YES

This job has been queued. The task number is 6191.

Subj: INTEGRATED BILLING ARCHIVING OF BILLING DATA [#109348] 24 Jun 92 15:32 8 Lines  
From: INTEGRATED BILLING PACKAGE in 'IN' basket. Page 1 \*\*NEW\*\*  
-----

The subject job has yielded the following results:

File	Log#	Archive Begin Date/Time	Archive End Date/Ti me	# Records Archived
CATEGORY C BILLING CLOCK	120	06/24/92@15:29:26	06/24/92@15:51:07	235
BILL/CLAIMS	121	06/24/92@15:51:10	06/24/92@16:32:39	463

Select MESSAGE Action: IGNORE (in IN basket)//

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu Archive Billing Data

#### EXAMPLE, cont.

The following are samples of the type of output generated by this option when the archive is printed to a device.

Archived CATEGORY C BILLING CLOCK JUN 24, 1992@15:29:28 Page: 1

```
-----
REFERENCE NUMBER: 50045          PATIENT: ADAMS,WALTER
CLOCK BEGIN DATE: JAN 11, 1986   STATUS: CLOSED
1ST 90 DAY INPATIENT AMOUNT: 1738.00  NUMBER INPATIENT DAYS: 2
CLOCK END DATE: JAN 10, 1987

REFERENCE NUMBER: 50178          PATIENT: DYLAN,THOMAS
CLOCK BEGIN DATE: MAR 16, 1989   STATUS: CANCELLED
1ST 90 DAY INPATIENT AMOUNT: 754.00  NUMBER INPATIENT DAYS: 1
CLOCK END DATE: MAR 17, 1989     USER ADDING ENTRY: GAVIN,JEREMIAH
DATE ENTRY ADDED: MAR 19, 1989
```

Archived BILL/CLAIMS JUN 24, 1992@15:30:30 Page: 1

```
-----
ACCOUNTS RECEIVABLE NUMBER: 500-K20987  BILL NUMBER: K20987
PATIENT NAME: KAGAN,PETER               EVENT DATE: NOV  3, 1988
LOCATION OF CARE: HOSPITAL (INCLUDES CLINIC) - INPT. OR OPT.
BILL CLASSIFICATION: OUTPATIENT
TIMEFRAME OF BILL: ADMIT THRU DISCHARGE CLAIM
RATE TYPE: MEANS TEST/CAT. C            WHO'S RESPONSIBLE FOR BILL?: PATIENT
STATUS: PRINTED                         STATUS DATE: JAN 30, 1990
PRIMARY BILL: K20987                    SC AT TIME OF CARE: YES
FORM TYPE: UB-82

MAILING ADDRESS NAME: MR. PETER KAGAN
MAILING ADDRESS STREET: 123 MAIN STREET
MAILING ADDRESS CITY: ALBANY
MAILING ADDRESS ZIP CODE: 12208          MAILING ADDRESS STATE: NEW YORK
NUMBER: 500
CHARGES: 127.00
TOTAL: 127.00
DATE ENTERED: NOV  3, 1988
ENTERED/EDITED BY: SOMMERS,RICHARD
INITIAL REVIEW: YES
INITIAL REVIEWER: SOMMERS,RICHARD
SECONDARY REVIEW: YES
SECONDARY REVIEWER: SOMMERS,RICHARD
AUTHORIZE BILL GENERATION?: YES
AUTHORIZER: SOMMERS,RICHARD
FIRST PRINTED BY: SOMMERS,RICHARD
DATE LAST PRINTED: NOV  3, 1988
STATEMENT COVERS FROM: NOV  3, 1988
IS THIS A SENSITIVE RECORD?: NO
TOTAL CHARGES: 127.00
FY 1 CHARGES: 127.00

REVENUE CODE: 500
UNITS OF SERVICE: 1
BEDSECTION: OUTPATIENT VISIT

INITIAL REVIEW DATE: NOV  3, 1988
SECONDARY REVIEW DATE: NOV  3, 1988
AUTHORIZATION DATE: NOV  3, 1988
DATE FIRST PRINTED: NOV  3, 1988
LAST PRINTED BY: SOMMERS,RICHARD
STATEMENT COVERS TO: NOV  3, 1988
BC/BS PROVIDER #: 097143307
FISCAL YEAR 1: 89
```

Purge Menu  
Archive/Purge Log Inquiry

**INTRODUCTION** This option is used to provide a full inquiry of any entry in the IB ARCHIVE/PURGE LOG file (#350.6). Once you enter the log #, all fields in the file for the selected entry will be displayed.

This output may be used to determine the status of a search template, whether archiving or purging has been completed, and who completed the search and/or archive/purge. The number of records, log status, initiator, and begin and end time for each of the three stages of the process (if applicable) are provided. The number of records found, archived, or purged will differ if records are deleted from the search template between processing steps.

Only holders of the XUMGR security key may access this option.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu

#### Archive/Purge Log Inquiry

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

```
Select LOG #: 121          BILL/CLAIMS      CLOSED      06-24-92
DEVICE: HOME// <RET>  Decnet      RIGHT MARGIN: 80// <RET>
```

```
LOG #: 121      BILL/CLAIMS                      JUN 24, 1992@17:38:16
=====
      Search Template : IB ARCHIVE/PURGE #121
      # Records Purged : 33
      Log Status      : CLOSED

      Search Begin Date/Time : JUN 24, 1992@14:51:38
      Search End Date/Time   : JUN 24, 1992@15:24:08
      Search Initiator       : LYNCH,KATHERINE

      Archive Begin Date/Time : JUN 24, 1992@15:40:10
      Archive End Date/Time   : JUN 24, 1992@16:15:39
      Archive Initiator       : LYNCH,KATHERINE

      Purge Begin Date/Time   : JUN 24, 1992@16:32:47
      Purge End Date/Time     : JUN 24, 1992@17:10:05
      Purge Initiator         : LYNCH,KATHERINE
```



Purge Menu  
Delete Entry from Search Template

**INTRODUCTION**    Once an entry meets the search criteria to be archived and subsequently purged and has been included in a search template, this option may be used to remove the entry from the template and prevent it from being purged. This option might be used for entries that meet the search criteria but because of unusual circumstances must be maintained on-line.

If more than one search template exists, they will be displayed for selection. Once selected, all records in that template will be displayed. You will then be allowed to choose which records to delete from the template. When the entry is successfully deleted, a message will be displayed.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu

#### Delete Entry from Search Template

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

Select one of the following files where a Search Template has been created:

350	INTEGRATED BILLING ACTION	Created on 06/23/92 by KAGAN,PETER
351	CATEGORY C BILLING CLOCK	Created on 06/23/92 by KAGAN,PETER
399	BILL/CLAIMS	Created on 06/23/92 by KAGAN,PETER

Select a File Number: **351**

```
=====
1  AIELLO,THOMAS      01/01/86      CLOSED      05/25/90
2  MOORE,TYLER        01/02/89      CLOSED      01/01/90
3  TYCH,DAVID         01/01/86      CANCELLED   07/01/90
4  TIMSON,PETER       01/01/86      CLOSED      09/03/90
```

Select 1-4, or '^' to exit: **4**

Do you wish to delete this entry? **Y** YES

This entry has been deleted.

## Purge Menu Find Billing Data to Archive

**INTRODUCTION** This option is used to identify records that meet the criteria to be archived and purged from the INTEGRATED BILLING ACTION file (#350), the CATEGORY C BILLING CLOCK file (#351), and the BILL/CLAIMS file (#399). Entries which are selected to be archived and subsequently purged are placed in a search (sort) template in the SORT TEMPLATE file (#.401). These entries may be viewed/printed through the List Search Template Entries option.

You may choose which of the three files to include in the search and specify a different archive/purge time frame for each file; however, a minimum of the current plus one previous fiscal year must be maintained on-line. In cases where interim claims exist, they may only be archived/purged if the final claim can be archived/purged.

The following criteria must be met in order for the prescription, clock, or bill to be included.

**INTEGRATED BILLING ACTION file (pharmacy copay actions)**  
The prescription which caused the action to be created must have been purged from the pharmacy database before the action may be archived. In addition, the bill must be closed in Accounts Receivable. The date the bill was closed is the date used to determine whether it will be included.

**BILLING CLOCK file**  
Only clocks with a status of CLOSED or CANCELLED and a clock end date prior to the selected time frame are included.

**BILL/CLAIMS file**  
The bill must be closed in Accounts Receivable. The date the bill was closed is used to determine whether it will be included.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu Find Billing Data to Archive

INTRODUCTION      The search is automatically queued and you are notified  
cont.                   of the results via electronic mail. An entry is made in the  
ARCHIVE/PURGE LOG file (#350.6) each time a search  
template is created. The log # provided in the mail message  
may be used for inquiries to this file.

The Purge Menu and this option are locked with the XUMGR  
security key.

Due to the brevity of this option, a process chart is not  
provided.

## Purge Menu

### Find Billing Data to Archive

#### EXAMPLE

The following example shows what might appear on your screen while using this option followed by a sample mail message. User responses appear in boldface type.

\*\*\* Find Billing Data to Archive \*\*\*

This option is used to begin the archive process for the following files:

```
#350 INTEGRATED BILLING ACTION
#351 CATEGORY C BILLING CLOCK
#399 BILL/CLAIMS
```

Specify your search criteria for each file. The search will be queue d.

```
-----
INTEGRATED BILLING ACTION file entries have already been found.
Do you wish to delete your search template and start again? N NO
-----
```

```
Do you wish to find CATEGORY C BILLING CLOCK file entries? Y YES
Enter the final date through which data should be archived: ?
```

Examples of Valid Dates:

JAN 20 1957 or 20 JAN 57 or 1/20/57 or 012057

T (for TODAY), T+1 (for TOMORROW), T+2, T+7, etc.

T-1 (for YESTERDAY), T-3W (for 3 WEEKS AGO), etc.

If the year is omitted, the computer assumes a date in the PAST.

Enter a date which is less than or equal to SEP 30, 1992.

```
Enter the final date through which data should be archived: 1 1 92 (JAN 01,
1992)
-----
```

```
Do you wish to find BILL/CLAIMS file entries? Y YES
```

```
Enter the final date through which data should be archived: 1 1 92 (JAN 01,
1992)
```

```
Is it okay to queue this search? Y YES
```

This job has been queued. The task number is 13405.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu Find Billing Data to Archive

EXAMPLE, cont.

Subj: INTEGRATED BILLING SEARCH OF BILLING DATA [#114481] 16 Dec 93 14:41  
8 Lines  
From: INTEGRATED BILLING PACKAGE in 'IN' basket. Page 1 \*\*NEW\*\*

-----

The subject job has yielded the following results:

File	Log#	Search Begin Date/Time	Search End Date/Time	# Records Found
CATEGORY C BILLING CLOCK	154	12/16/93@14:40:50	12/16/ 93@14:40:54	82
BILL/CLAIMS	155	12/16/93@14:40:55	12/16/93@14:40:58	1

Select MESSAGE Action: IGNORE (in IN basket)//

Purge Menu  
List Archive/Purge Log Entries

**INTRODUCTION** This option is used to list all log entries in the IB ARCHIVE/PURGE LOG file (#350.6). Entries are listed in the order in which they were added to the file. A new entry is filed each time a new search template is created through the Find Billing Data to Archive option. The log number, archive file, date created, initiator, and status is provided for each entry.

For a more detailed display on specific entries, please use the Archive/Purge Log Inquiry option.

Only holders of the XUMGR security key may access this option.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu

#### List Archive/Purge Log Entries

#### EXAMPLE

The following example shows what might appear on your screen while using this option followed by a sample output. User responses are shown in boldface type.

DEVICE: **A102**                      LASER  
DO YOU WANT YOUR OUTPUT QUEUED? NO// **<RET>**

INTEGRATED BILLING ARCHIVE/PURGE LOG ENTRIES      JUN 25,1992    07:57      PAGE 1  
DATE

LOG#	ARCHIVE FILE	CREATED	INITIATOR	STATUS
1	INTEGRATED BILLING ACTION	05/01/92	KAGAN,PETER	CLOSED
2	CATEGORY C BILLING CLOCK	05/01/92	KAGAN,PETER	CANCELLED
3	CATEGORY C BILLING CLOCK	05/01/92	KAGAN,PETER	CLOSED
4	BILL/CLAIMS	05/01/92	KAGAN,PETER	CLOSED
5	INTEGRATED BILLING ACTION	06/01/92	CHARLES,JOHN	CLOSED
6	CATEGORY C BILLING CLOCK	06/01/92	CHARLES,JOHN	CL OSED
7	BILL/CLAIMS	06/01/92	CHARLES,JOHN	CLOSED
8	INTEGRATED BILLING ACTION	07/02/92	KAGAN,PETER	CLOSED
9	CATEGORY C BILLING CLOCK	07/02/92	KAGAN,PETER	CANCELLED
10	BILL/CLAIMS	07/02/92	KAGAN,PETER	CLOSED



## Purge Menu List Search Template Entries

**INTRODUCTION** A search template is created in the SORT TEMPLATE file (#.401) each time the Find Billing Data to Archive option is used. The List Search Template Entries option is used to list all entries in a search template that are scheduled to be archived and subsequently purged. This list may be used to review the entries and ensure that they should be included in the archive/purge of the file. If you have an entry that meets the purge criteria, but due to unusual circumstances must be maintained on-line, it may be deleted from the search template through the Delete Entry from Search Template option.

If more than one template exists, they will be listed for selection. The output may be sorted by patient as well as an additional specified field. <??> may be entered for a list of appropriate fields for selection and additional commands which may be used to customize your list. The selectable fields differ depending on the file. You will be prompted to enter a range for patient name(s) and the additional field (if selected). If you accept the default of FIRST, the system will assume you wish to include all entries.

The fields included in the display will depend on which of the three files the template is created from. The patient name and status is displayed for all three files. The INTEGRATED BILLING ACTION file (#350) also displays a brief description of the pharmacy prescription and the date it was added to the field. The CATEGORY C BILLING CLOCK file (#351) displays the clock begin and end dates. The BILL/CLAIMS file (#399) displays the rate type and status date.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu List Search Template Entries

#### EXAMPLE

The following example shows what might appear on your screen while using the List Search Template Entries option. User responses are shown in boldface type.

Select one of the following files where a Search Template has been created:

350	INTEGRATED BILLING ACTION	Created on 06/23/92 by KAGAN,PETER
351	CATEGORY C BILLING CLOCK	Created on 06/23/92 by KAGAN,PETER
399	BILL/CLAIMS	Created on 06/23/92 by KAGAN,PETER

Select a File Number: **351**

-----  
Template entries will be listed for the following file:

CATEGORY C BILLING CLOCK            Entries Found on JUN 23, 1992@15:38:49  
-----

Specify Sort Criteria:

START WITH PATIENT: FIRST// **<RET>**  
WITHIN PATIENT, SORT BY: **<RET>**  
DEVICE: **<RET>** Decnet      RIGHT MARGIN: 80// **<RET>**

CATEGORY C BILLING CLOCK SEARCH TEMPLATE	JUN 23,1992 16:35	PAGE 1
CLOCK BEGIN	CLOCK END	
PATIENT	DATE	STATUS

-----

BANYON,STEPHEN	JUN 28,1988	CLOSED	JUN 27,1989
MUNSON,CHRISTOPHER	MAY 30,1989	CANCELLED	MAY 29,1990
RYAN,TIMOTHY	MAR 15,1989	CLOSED	MAR 14,1990
SIMMONS,EDWARD	SEP 1,1988	CLOSED	AUG 31,1989
SMITH,JOHN	JAN 2,1989	CLOSED	JAN 1,1990

Purge Menu  
Purge Billing Data

**INTRODUCTION** This option is used to purge data from the INTEGRATED BILLING ACTION file (#350) (pharmacy copayment transactions only), the CATEGORY C BILLING CLOCK file (#351), and/or the BILL/CLAIMS file (#399). In order for entries to be purged, they must first be stored in a search template created by the Find Billing Data to Archive option, and archived through the Archive Billing Data option. If there is more than one search template created and archived, you may select which file(s) you wish to purge.

The XUMGR security key and an electronic signature code are required to complete the purge process. The purge is automatically queued, all data elements in the file for each entry in the search template are purged, and the search template is deleted.

You will be notified of the results via electronic mail. The ARCHIVE/PURGE LOG file (#350.6) is updated when the archive is completed. The log # provided in the mail message may be used for inquiries to this file.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Purge Menu Purge Billing Data

#### EXAMPLE

The following example shows what might appear on your screen while using this option followed by a sample mail message. User responses are shown in boldface type. The symbol <signature> is used to indicate an electronic signature code being entered.

\*\*\* Purge Billing Data \*\*\*

This option is used to purge data from the following files:

#350 INTEGRATED BILLING ACTION  
#351 CATEGORY C BILLING CLOCK  
#399 BILL/CLAIMS

The purge process will be queued.

-----  
You must archive INTEGRATED BILLING ACTION entries before you can purge.  
-----

Do you wish to purge CATEGORY C BILLING CLOCK file entries? **Y** YES  
-----

Do you wish to purge BILL/CLAIMS file entries? **Y** YES

ENTER ELECTRONIC SIGNATURE: **<signature>**  
Your Electronic Signature Code has been verified.

Is it okay to queue this purge? **Y** YES

This job has been queued. The task number is 6192.

Subj: INTEGRATED BILLING PURGING OF BILLING DATA [#109349] 24 Jun 92 15:41  
8 Lines

From: INTEGRATED BILLING PACKAGE in 'IN' basket. Page 1 \*\*NEW\*\*  
-----

The subject job has yielded the following results:

File	Log#	Purge Begin Date/Time	Purge End Date/Time	# Records Purged
CATEGORY C BILLING CLOCK	120	06/24/92@15:35:56	06/ 24/92@15:50:29	235
BILL/CLAIMS	121	06/24/92@15:50:47	06/24/92@16:41:05	463

Select MESSAGE Action: IGNORE (in IN basket)//

## Repost IB Action to Filer

**INTRODUCTION**    The Repost IB Action to Filer option allows Integrated Billing action entries that did not successfully pass to Accounts Receivable to be reposted to the IB filer.

Though this option will seldom, if ever, be used, it allows transactions with a status of COMPLETE (which do not have an Accounts Receivable transaction number assigned to them) to be reposted.

If there is not enough data to repost the action or if the number selected already has an Accounts Receivable transaction number assigned to it, an appropriate message will be displayed and the first prompt will be repeated. If the reposting is successful, you will simply return to the first prompt.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Repost IB Action to Filer

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type. The first entry is not reposted because there is not enough data. The second entry is successfully reposted.

```
Select INTEGRATED BILLING ACTION REFERENCE NUMBER: 500291
Are You SURE: ? NO// YES
Attempting to Repass!
```

```
Not enough data to repost
Select INTEGRATED BILLING ACTION REFERENCE NUMBER: 500295
Are You SURE: ? NO// YES
Attempting to Repass!
```

```
Select INTEGRATED BILLING ACTION REFERENCE NUMBER:
```

## Start the Integrated Billing Background Filer

**INTRODUCTION** When a filer job has terminated unexpectedly, this option may be used to force a filer to start running.

If a filer is currently running, the following message will be displayed.

```
"<<<<WARNING!!! Filer appears to have been started on  
(date/time)>>>>".
```

You will then be given the option of starting a second filer.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Start the Integrated Billing Background Filer

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

This option will start the IB Background Filer running. If one filer is currently running a second filer will be started. Manually starting the filer with this option is not ordinarily necessary, as it will start itself when needed. However, if the Filer job should be killed or your system goes down with the filer running, you may need to use this option.

Are you sure? NO//**YES**

IB FILER QUEUED AS TASK #1905



## Stop the Integrated Billing Background Filer

**INTRODUCTION** This option may be used to shutdown the IB background filer. The filer will cease when it has finished processing all its known transactions. Processing with Accounts Receivable will then be accomplished in the foreground.

When you shutdown the filer through this option, the FILE IN BACKGROUND site parameter is automatically edited to NO. The IB engine will file in the foreground until that parameter is edited to YES through the Enter/Edit IB Site Parameters option.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Stop the Integrated Billing Background Filer

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

This option will edit the IB site parameter file and allow for the graceful shutdown of the IB Background filer. Use of this option will cause the IB Engine to file in the foreground until the site parameter FILE IN BACKGROUND is edited to yes.

After using this option the filer may attempt to complete filing posted transactions prior to stopping. This option should be used prior to stopping taskmanager when doing an orderly system shutdown.

REMEMBER: If you use this option, you must edit the site parameter FILE IN BACKGROUND to yes to allow the filer to restart, or use the Start IB filer option.

```
Are you sure? NO// Y YES
IB Background Filing stopped
```

## Verify RX Co-Pay Links

**INTRODUCTION**    The Verify RX Co-Pay Links option compares the softlink stored in Integrated Billing with the pointer in the PRESCRIPTION file pointing back to Integrated Billing to provide a display/printout of all integrated billing actions which do not verify for a selected range of reference numbers.

Means Test charges may appear on this report if they are listed in the B cross-reference when there is no actual entry for the reference (this should rarely happen) or if the Means Test charge has no softlink.

This option should be used as a tool for resolving problems. False errors may be reported for a number of legitimate occurrences, such as the RX was deleted or the copay cancelled.

Due to the brevity of this option, no process chart is provided.

## Section 5 - System Manager's Integrated Billing Menu

### Verify RX Co-Pay Links

#### EXAMPLE

The following example shows what might appear on your screen while using this option. User responses are shown in boldface type.

#### Verify IB - Pharmacy Co-Pay links

START WITH REFERENCE NUMBER: **5001**

GO TO REFERENCE NUMBER: **50010**

Output Device: HOME// **A137**

RIGHT MARGIN: 80// **<RET>**

DO YOU WANT YOUR OUTPUT QUEUED? NO// **<RET>** (NO)

Verify Integrated Billing links to Pharmacy APR 10, 1991 Page:1

Verify IB Reference Number 5001 to 50010

REF. NO.	PATIENT	SSN	RX#	REFILL	IB LINK
CHARGE ID	TRANS ERROR MESSAGE				
5001	DISTASI,MICHAEL	6654	RX#125 120		52:125
500-M10003 5	RX ENTRY MISSING IB NODE				
5002	DISTASI,MICHAEL	6654	RX#111125 51		52:111125;1:1
500-M10003 5	RX ENTRY MISSING IB NODE				
5003	SPINNER,ALAN A	0750P	RX#111128 1		52:111128;1:1
500-M10004 6	RX ENTRY MISSING IB NODE				
5004	SPINNER,ALAN A	0750P	RX#111199 99991		52:111199;1:1
500-M10004 6	RX ENTRY MISSING IB NODE				
5007	DISTASI,MICHAEL	6654	RX#125 120		52:125
500-M10006 11	RX ENTRY MISSING IB NODE				
5008	DISTASI,MICHAEL	6654	RX#111125 5 1		52:111125;1:1
500-M10006 11	RX ENTRY MISSING IB NODE				
5009	SPINNER,ALAN A	0750P	RX#111128 1		52:111128;1:1
500-M10007 12	RX ENTRY MISSING IB NODE				
5009	SPINNER,ALAN A	0750P	RX#111128 1		52:1111 28;1:1
500-M10007 12	IB CROSS-REFERENCE BUT NO ENTRY				
50010	SPINNER,ALAN A	0750P	RX#111199 99991		52:111199;1:1
500-M10007 12	RX ENTRY MISSING IB NODE				

## Forms Output Utility



### *New Option*

## **Introduction**

This option displays a list of local forms defined for your site and the associated actions allow you to add local forms and data elements and to override specific fields on a local form associated with the national one. It also allows you to define a local SCREEN 9 for bill data entry.

## **List of Local Forms Screen**

### ***Actions***

#### Add Local Form

This action allows you to define local output billing forms and local input data screens that are not supported nationally but are needed for specific insurance companies or bill types. It provides the ability to create new forms/screens from scratch, as well as provides for two ways to easily create a new form "copy" based on an existing nationally released form.

The WANT TO ASSOCIATE THIS FORM WITH A NATIONAL FORM? field allows you to associate a new local form with a nationally released form without actually copying any data. This association allows each site to create a local form, but only require modifications to the fields of the form that are different from the nationally released definitions. Any form field definition that is not changed on the local form will continue to use the standard national definition. Any changes from the national definition however, will be stored as local entries that, when a bill is generated using this local form definition, will override the nationally released definition for these changed fields only. This way, data changes can be made without the site having to take responsibility for maintaining the entire form. Only forms that have the same BASE FILE NUMBER and FORM TYPE can be copied. Any local changes made must be tracked carefully as the site will be responsible for maintaining any locally modified fields should future changes become necessary. Since unmodified fields still rely on the national form for their definition, any changes made via a nationally released update to unmodified fields on the form will be automatically incorporated into a local form definition associated with a national form definition.

## Forms Output Utility

### **Introduction, cont.**

The WANT TO COPY ALL FIELDS FROM AN EXISTING FORM? field allows a straight copy, where the field definitions for a selected form are all copied into new entries referencing the new local form. Any local form created via an "unassociated" copy will have NO link back to the national form once the copy is completed.

Since no changes to nationally released software will be made to these local entries, you are free to modify the new form definition in whatever way you need to and are responsible for any and all changes that are made or will need to be made in the future.

### Form View/Edit

Allows you to view and edit a selected form. This action brings you to the Detailed View of Local Form Screen. See below.

### Add/Edit Local Data Elements

Allows you to define local data elements that are not supported nationally but are needed to be included on one or more local billing form(s). Nationally released data element definitions CANNOT be modified via this action.

### View Data Element

Allows you to view the description, extract code, and other attributes of any data element defined at the site, both national and local.

### Test Form

Allows you to test the output of a selected form.

## **Detailed View of Local Form Screen**

### Edit Local Form Demographics

Allows you to edit the name, description, pre and post processing logic and the extract and output logic for local forms.

### Delete A Local Form

Allows you to delete a locally defined form. When the form is deleted, all form fields and form field definitions (not data element definitions) associated with that form are also deleted.

### Edit Form Fields

Allows you to edit the field content defined for a local form associated with a national form that has local "override" field content definitions; or to edit any local, unassociated form field's form position data and field content definitions. This action brings you to the Bill Form Fields Screen. See below.

### Switch Form

Allows you to switch between forms without exiting the option.

## **Bill Form Fields Screen**

### Add Local/Override Field

Allows you to add fields to a local unassociated form and allows the addition of 'override' fields for local modifications to any form.

### Delete Local Form Field

Allows you to delete the 'override' form field content definitions for a local form associated with a national form or to delete any fields defined for an unassociated local form that do not have override fields defined for them (You must delete any override fields first).

### Edit Local Form Field

Allows you to edit the field content for a local form such as page or sequence, first line number, starting column or piece, maximum number of lines, short description, etc.

### Local Field Content Definition

Allows you to edit the "override" form field content definitions for a local form associated with a national form, or to edit the form field content of any field on an unassociated local form.

### Add/Edit Local Data Elements

Allows you to define local data elements that are not supported nationally but are needed to be included on one or more local billing form(s). Nationally released data element definitions CANNOT be modified via this action.

### View Data Element

Allows you to view the description, extract code, and other attributes of any data element defined at the site, both national and local.

### View Form Fields

Allows you to view the composition of a local 'override' or national form field for a local form. This includes both the form field's form position data as well as the associated form field content definition.

## Forms Output Utility

### **Introduction, cont.**

#### **Example 1 - CUSTOM BILL PRINT**

Your site needs to print the total charge, not unit charge, in Block 24F on the HCFA 1500.

1. If there is not currently a local form defined for the HCFA 1500, use the ADD A LOCAL FORM option to add a form that will become the local HCFA 1500. Base file will be 399, print form type will be P (printed). Respond Yes to associate with national form question and choose the HCFA 1500 as the parent form. Give it a form length of 66 and enter a short description like Local 1500. Since this form is now "associated" with the national HCFA 1500 form, all of the fields will default to the definition provided by the national HCFA 1500 form when the bills are printed. The only time you'll want to change the pre and post processing, edit or output routines is if you do not want the national defaults, but want to write your own. Be very careful if you change any of these executable fields.
2. Select View Form and, if prompted for selection, enter the local HCFA 1500 form sequence # from the list displayed. This will display the general characteristics of this form.
3. Choose the Edit Form Fields action (FF). This will display a list of the form fields that make up this form.
4. Press return for NEXT SCREEN until the field CHARGES (BX-24F) appears in the field list.
5. The charge field is a data element that is not able to be extracted on its own. Its value depends on the "line" within box 24 that it will print on because it depends on revenue, code, date, etc. This kind of data element is considered part of a "group" element and that group element must be extracted before any of its group member data element can be output. The group data element for charges is N-HCFA 1500 SERVICES (PRINT). If you use the View Data Element option and enter this group element name, you'll see it sets up the array, IBXSAVE("BOX24",line #) for later use by its group member elements. You will also see that the 9th "^" piece of this array is the # of units. This is a calculate only field (no output from it when it is processed).
6. Select the Add Local/Override Field option and enter the sequence number of the CHARGES field.



## Forms Output Utility

### **Example 1, cont.**

7. Respond Yes to OK? prompt and to the copy over from the original field question. This is almost always a good idea so you can see what the original format of the field was.
8. Leave the data element field the same and do not enter an insurance company or bill type unless you want to restrict this change to a specific insurance company and/or bill type.
9. Now change the format field to multiply the value of charges (in variable IBXDATA(line #)) by the value of the units on the corresponding line # (in the 9th "^" piece of IBXSAVE("BOX24",line #)).  
  
 Replace \$J(IBXDATA(Z)  
 With \$J(IBXDATA(Z)\*\$P(\$G(IBXSAVE("BOX24",Z)),"^",9))
10. Now modify the format description to reflect the change you just made, and the override of the field is complete.
11. To make the formatter print the local copy of the HCFA 1500, use the IRM menu option, Select Default Device For Forms, and enter the name of your local form as the value of the PRINT FORM field. The next time a HCFA 1500 bill prints, it will print the charges as total charges, not a unit charge.

### **Example 2 - LOCAL SCREEN 9**

Your site needs to print the provider's phone number in Form Locator 11 on the UB-92 for inpatient bills for insurance company Blue Cross of East Wherever and this data is not currently captured in *VISTA*.

There are several steps involved in this task. First, you must set up a local field for this data in the bill/claims file and define a local data element in the forms data element file, then create or modify a local Screen 9 to enable the clerks to input this data for this insurance company's bills. You then need to edit your local UB-92 print form to include this data in Form Locator 11 for this insurance company and attach this local Screen 9 to the national UB-92 bill form. Only the steps for the creation of local Screen 9 are included here.

## Forms Output Utility

### **Example 2, cont.**

1. Use Fileman to add a local form field, numbered at least 10000 and stored on a numeric node of at least 10000 for this new data element. These are the only kind of fields that can be INPUT on a local Screen 9 (any field can be displayed).
2. Using the output formatter, select the Add/Edit Local Data Elements action. Enter a name for this new data element. Only national fields can start with N-, so any other name is valid. Set the base file to 399 and the type of element to "F" (Fileman). Type the name that you gave the local field in step 1 as the Fileman field reference. Make sure you type it correctly as no edit checks are made on the field at this point. For Fileman return format, use "I" if you want the "raw" data returned or "E" if you want Fileman to return it in display format. Then enter a description of the field so you can identify it the next time you need to see the list of local data elements.
3. Again using the output formatter, if there is not currently a local form defined for local Screen 9 for the national UB-92 form, use the ADD A LOCAL FORM option to add this form. Base file will be 399, print form type will be S (screen). Respond No to associate with national form question and to the copy fields form another form question. Enter a short description. For now, do not put any code in the form pre and post processing fields. Code can be written to do edits for the data on the screen that will prevent it from being authorized unless the edits are passed (post-processing). The pre-processing is used to set up any variables that may be needed to process this screen. The pre-processing is executed before the screen is displayed, the post-processing takes place after the standard authorize edits are executed upon leaving the bill.
4. Select View Form (VF) and, if prompted for selection, enter the local UB-92 screen form sequence #. This will display the general characteristics of this form.
5. Choose the Edit Form Fields action (FF). This will display a list of the form fields that make up this form or, if a new form, will display "No fields currently defined for this form".
6. Choose Add Local/Override Field action (AF). If there are any fields already defined for this screen, there will be a prompt to allow you to override an existing field. Respond No if this question is asked. Respond 1 for page/seq then enter the number of the line on the screen where you want to prompt for

## Forms Output Utility

**Example 2, cont.**

this field to appear and the column the prompt should start in. Skip max # of lines since this data element can have only one value per bill. Enter a length for the field and it should be long enough to hold the data and its prompt, if one is desired. Leave pad as none, and edit status as editable. Give it an edit group number that is different from any other group that may already be on the screen. For this data element, assume the field will be output exactly as it is stored, so no format code is needed.

7. Now follow steps 1-3 in the first example, but use the UB-92 national form wherever it says to use the HCFA 1500.
8. Press return for NEXT SCREEN until the field FORM LOCATOR 11 (FL-11/1) appears in the field display area.
9. Select the Add Local/Override Field action and enter the sequence number of the FORM LOCATOR 11 (FL-11/1) field.
10. Respond Yes to OK? prompt and No to the copy over from the original field question. This is OK in this case because the new data element is a single-valued field that has absolutely nothing to do with the field it is overriding.
11. Enter the name of your local data element for the provider phone number in the data element field. Enter the BLUE CROSS of EAST WHEREVER insurance company name at the insurance company prompt. Enter bill type as inpatient to restrict this change to a specific bill type for this one insurance company. There is no need to enter Format code or description as we're assuming the data is displayed the same way it is stored in the database. If you want it displayed with dashes, but store just the numerics, you can reformat it using M code here. Make sure there is a FileMan input transform on the data field to strip out the dashes before it stores it. This will now be the override field output for inpatient bills for the BL CR of EAST WHEREVER insurance company's form locator 11.
12. To make the formatter print the local copy of the UB-92 and to associate this local Screen 9 with the UB-92 form type, use the IRM menu option, Select Default Device For Forms, and enter the name of your local form as the value of the PRINT FORM field and the name of your local UB-92 Screen 9 as the local form you just created/edited.

## Section 5 - System Manager's Integrated Billing Menu

### Forms Output Utility

#### **Example 2, cont.**

13. The next time a UB-92 bill is entered/edited whose insurance company is BL CROSS of EAST WHEREVER, there will be a Screen 9 available to allow entry of the provider phone #. This field will also print on the UB-92 as the first line in Form Locator 11 when the bill is printed.

## Charge Master IRM Menu

### Load Host File Into Charge Master



*New Option*

#### **Introduction**

This option allows new rates and charges to be added to the Charge Master form host files. This is only available for specific rates and charges. The Host file must be in a predefined format to be read correctly. Following are the available choices.

*Load CMAC into XTMP* - Upload the CMAC from a host file.

*Load AWP into XTMP* - Upload Average Wholesale Price list from a host file.

*Assign Charge Set* - Assign charges loaded into XTMP to Charge Sets.

*Check Data Validity* - Check files waiting to be loaded into the Charge Master for data validity.

*Load into Charge Master* - Check files waiting to be loaded into the Charge Master for data validity, and upload them.

*Delete XTMP files* - Delete files in XTMP.

#### **Example**

Select one of the following:

- 1.1        Load CMAC into XTMP
- 1.2        Load AWP into XTMP
- 2          Assign Charge Set
- 3          Check Data Validity
- 4          Load into Charge Master
- 5          Delete XTMP files

**Enter response:** 1.1    Load CMAC into XTMP

Upload the CMAC from a host file:    'CMACxxx.TXT'    w/xxx = locality

CMAC Host files available for upload in: DISK\$VA3:[HARPER]

CMAC184.TXT  
CMAC185.TXT

## Section 5 - System Manager's Integrated Billing Menu

### Charge Master IRM Menu Load Host File Into Charge Master

#### **Example, cont.**

Enter a Host File Name: **CMAC184.TXT**

Professional Component Modifier: // **<RET>**

Professional Component charges will not be uploaded.

Technical Component Modifier: // **<RET>**

Technical Component charges will not be uploaded.

Proceed with upload now? **YES**

Loading CMAC184.TXT into ^XTMP

.....  
.....

Done. 6836 lines processed.

The following files were created, they will be purged in 2 days:

A) IB upload of Host file CMAC184.TXT, on 5/30/97@10:53:45 by HARPER,A

IBCR UPLOAD CMAC184.TXT 184 Count = 12849 Item = CP T

	Subfile	Count	Charge Set
	-----	-----	-----
1	CLASS 1	6836	
2	CLASS 2	21	
3	CLASS 3&4	5992	

Charge Master IRM Menu  
Rate Schedule Adjustment Enter/Edit



*New Option*

**Introduction**

This option allows the enter/edit of the Rate Schedule Adjustment field (#363.10). This field causes all charges for a particular schedule to be adjusted by a site defined amount. It requires M-code that is executed to provide the adjusted amounts and; therefore, requires programmer access (DUZ(0)="@").

This Adjustment will have an immediate effect on the charges of the Rate Schedule. The Adjustment must be correct before the option can be exited.

**Example**

Select RATE SCHEDULE NAME: **IA-OPT**

The base unit charges are not currently Adjusted.

ADJUSTMENT: **S X=X+3**

If the base unit charge is \$100,  
this Adjustment will result in a charge of: \$ 100.00

Is this correct? **YES**

## System Manager's Integrated Billing Menu

### Start the CHAMPUS Rx Billing Engine



#### *New Option*

### **Introduction**

This option is used by IRM personnel to queue the background filer to run. Several parameters must be set before this job can be queued to run; if they are not set, the job will not be queued. This job actually will cause four jobs to be queued. The first job is the background filer itself. After this job has been queued and has successfully opened a TCP/IP channel with the RNA system, this job will queue off a secondary filer job. If the first job aborts in any way, the secondary filer will assume the responsibilities of the primary filer and spawn another secondary filer. The option also directly queues a second job to open a separate TCP/IP channel with the RNA system to receive updates of the Average Wholesale Pricelist (AWP). This update is normally received weekly. The AWP Update job will also spawn a secondary job, in a manner similar to the background filer, which will take over for the primary AWP update job if that job aborts. Note that after the AWP Update is received, members of the IB CHAMP RX START mail group will receive an alert notifying the user that the update has completed.

### **Example**

Is it okay to queue these jobs to run? **YES**

The CHAMPUS billing engine has been queued as task# 381990.

The AWP Update engine has been queued as task# 381991.



## System Manager's Integrated Billing Menu

### Stop the CHAMPUS Rx Billing Engine



*New Option*

### **Introduction**

This option may be used to gracefully shut down the billing engine if a planned system shutdown is scheduled to occur, or if the RNA system is scheduled to be shutdown. The option sets a flag which calls for both the background filer and AWP update engine to stop running. The secondary jobs for both of these jobs will shutdown as well.

### **Example**

Are you sure you wish to shut down these jobs? **y** YES

The CHAMPUS Billing and AWP Update engines will be shut down.



# Glossary

Admission Sheet	Worksheet commonly used in front of inpatient charts with a workspace available for concurrent reviews.
ALOS	Average Length of Stay
AMIS	Automated Management Information System
Automated Biller	Utility which establishes third party bills with no user intervention.
Background Filer	A background job that accumulates charges and causes adjustment transactions to a bill.
BASC	Billable Ambulatory Surgical Code
Billing Clock	A 365 day period, usually beginning when a patient is Means Tested and is placed in Category C, through which a patient's Means Test charges are tracked. An inpatient's Medicare deductible copayment entitles the patient to 90 days of hospital/nursing home care. These 90 days must fall within the 365 day billing clock.
Category C Patient	Those patients responsible for making copayments as a result of Means Test legislation.
Check-off Sheet	A site-configurable printed form containing CPT codes, descriptions, and dollar amounts (optional). Each check-off sheet may be assigned to an individual clinic or multiple clinics.
Claims Tracking	Module which allows for the tracking of an episode of care, from scheduling through final disposition of the bill.
Collateral Visit	A visit by a non-veteran patient whose appointment is related to or associated with a patient's treatment.
Continuous Patient	Patients continuously hospitalized at the same level of care since July 1, 1986.

Converted Charges	During the conversion, the BILLS/CLAIMS file (#399) is checked to insure that each outpatient visit has been billed. For each visit without an established bill, one is established and given a status of CONVERTED.
Copayment	The charges, required by legislation, that a patient is billed for services or supplies.
CPT	Current Procedural Terminology A coding method developed by the American Hospital Association to assign code numbers to procedures which are used for research, statistical, and reimbursement purposes.
Diagnosis Code	A numeric or alpha-numeric classification of the terms describing medical conditions, causes, or diseases.
Encounter Form	A paper form used to display data pertaining to an out-patient visit and used to collect additional data pertaining to that visit.
Form Locator	A block on the UB-82 or UB-92 bill form.
HCFA	Health Care Finance Administration
HCFA-1500	AMA approved health insurance claim form used for outpatient third party billings.
HINQ	Hospital Inquiry
ICD-9	International Classification of Diseases, Ninth Modification A coding system designed by the World Health Organization to assign code numbers to diagnoses and procedures for statistical, research, and reimbursement purposes.
Integrated Billing Action	The billing record of an event or an increase/decrease in the charges related to an event. An event is any billable goods or services provided by the VA.
Interqual Criteria	A method of evaluating appropriateness of care.

Locality Rate Modifier	The Geographic Wage Index that is used to account for wage differences in different localities when calculating the ambulatory surgery charge. It is multiplied by the wage component to get the final geographic wage component of the charge.
MCCR	Medical Care Cost Recovery - The collection of monies by the Department of Veterans Affairs (VA).
Means Test	A financial report used to determine if a patient may be required to make copayments for care.
Principal Diagnosis	Condition, established after study, to be chiefly responsible for the patient's admission.
Provider	A person, facility, organization, or supplier which furnishes health care services.
Reimbursable Insurance	Health insurance that will reimburse VA for the cost of medical care provided to its subscribers.
Revenue Code	A code on a third party bill identifying a specific accommodation, ancillary service, or billing calculation.
Stop Code	A three-digit number corresponding to an additional stop/service a patient received in conjunction with a clinic visit. Stop code entries are used so that medical facilities may receive credit for the services rendered during a patient visit.
Third Party Billings	Instances where a party other than the patient is charged.
UB-82	AMA approved health insurance claim form previously used for third party billings.
UB-92	AMA approved health insurance claim form used for third party billings.
Utilization Review	Review carried out by allied health personnel at predetermined times during the hospital stay to assess the appropriateness of care.
Wage Percentage	The percentage of the rate group unit charge that is the wage component to be used in calculating the HCFA charge for ambulatory surgical procedures.

## **Military Time Conversion Table**

STANDARD	MILITARY
12:00 MIDNIGHT	2400 HOURS
11:00 PM	2300 HOURS
10:00 PM	2200 HOURS
9:00 PM	2100 HOURS
8:00 PM	2000 HOURS
7:00 PM	1900 HOURS
6:00 PM	1800 HOURS
5:00 PM	1700 HOURS
4:00 PM	1600 HOURS
3:00 PM	1500 HOURS
2:00 PM	1400 HOURS
1:00 PM	1300 HOURS
12:00 NOON	1200 HOURS
11:00 AM	1100 HOURS
10:00 AM	1000 HOURS
9:00 AM	0900 HOURS
8:00 AM	0800 HOURS
7:00 AM	0700 HOURS
6:00 AM	0600 HOURS
5:00 AM	0500 HOURS
4:00 AM	0400 HOURS
3:00 AM	0300 HOURS
2:00 AM	0200 HOURS
1:00 AM	0100 HOURS

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# List Manager Appendix

The List Manager is a tool that displays a list of items in a screen format and provides the following functionality.

- browse through the list
- select items that need action
- take action against those items
- select other List Manager actions without leaving the option

Actions(s) are entered by typing the name(s) or mnemonics(s) at the "Select Action" prompt. Where applicable, multiple actions may be selected with one entry by separating them with a semicolon (;). For example, the single entry "AL;CI" would cause the software to advance through two separate actions (Appointment Lists and Check In).

You can also select an action and entry number by using an equals sign (=).

CI=1	will process entry 1 for check in
CI=3 4 5	will process entries 3, 4, 5 for check in
CI=1-3	will process entries 1, 2, 3 for check in

In addition to the various actions that may be available specific to the option you are working in, List Manager provides generic actions applicable to any List Manager screen. You may enter double question marks (??) at the "Select Action" prompt for a list of all actions available. On the following page is a list of generic List Manager actions with a brief description. The mnemonic for each action is shown in brackets [ ] following the action name. Entering the mnemonic is the quickest way to select an action.

<b>Action</b>	<b>Description</b>
Next Screen [+]	move to the next screen
Previous Screen [-]	move to the previous screen
Up a Line [UP]	move up one line
Down a Line [DN]	move down one line
Shift View to Right [>]	move the screen to the right if the screen width is more than 80 characters
Shift View to Left [<]	move the screen to the left if the screen width is more than 80 characters
First Screen [FS]	move to the first screen
Last Screen [LS]	move to the last screen
Go to Page [GO]	move to any selected page in the list
Re Display Screen (RD)	redisplay the current screen
Print Screen [PS]	prints the header and the portion of the list currently displayed
Print List [PL]	prints the list of entries currently displayed
Search List [SL]	finds selected text in list of entries
Auto Display(On/Off) [ADPL]	toggles the menu of actions to be displayed/not displayed automatically
Quit [QU]	exits the screen